

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street)

2800 Shirlington Road, Suite 930

☐Check if different  
than previously  
reported. (ACC)

Arlington

VA

22206

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00325076

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

1 1

0 2

2 0 1 0

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

1 0

0 1

2 0 1 0

through

1 0

1 3

2 0 1 0

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dorie Velezis

Signature of Treasurer

Electronically Filed by Dorie Velezis

Date

1 0

2 1

2 0 1 0

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	1942798.34
(b) Cash on Hand at Beginning of Reporting Period .....	1999726.80	
(c) Total Receipts (from Line 19) .....	43844.90	592793.77
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2043571.70	2535592.11
7. Total Disbursements (from Line 31) .....	834975.28	1326995.69
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1208596.42	1208596.42
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	4021.36	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A) .....	31575.00	316070.24
(ii) Unitemized .....	12269.90	184398.85
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	43844.90	500469.09
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	43844.90	500469.09
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	648.28
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	11801.40
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	79875.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	79875.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	43844.90	592793.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	43844.90	512918.77

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	79625.00	
(ii) Non-Federal Share.....	0.00	79625.00	
(b) Other Federal Operating Expenditures.....	703325.28	976496.58	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	703325.28	1135746.58	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	46500.00	
24. Independent Expenditure (use Schedule E) .....	128650.00	137199.11	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	5550.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	5550.00	
29. Other Disbursements.....	0.00	2000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	834975.28	1326995.69	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	834975.28	1247370.69	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	43844.90	500469.09
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5550.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	43844.90	494919.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	703325.28	1056121.58
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	648.28
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	703325.28	1055473.30

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR CHARLES D AYRES

Mailing Address 4911 CASA ORO DR

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.46271

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID BAIN

Mailing Address 1000 PECAN DR

City

MCKINNEY

State

TX

Zip Code

75069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CORWIN ENGINEERING INCORPORATED

Occupation  
ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46158

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MRS SHIRLEY BANTER

Mailing Address 13611 NEILS BRANCH DR

City

HOUSTON

State

TX

Zip Code

77077

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.46184

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103804-0000416  
Transaction ID : **SA11AI.46271**

B. Form/Schedule : **SA11AI** 0104630-0000301  
Transaction ID : **SA11AI.46158**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46184**

0106328-0000328



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A.**

Full Name (Last, First, Middle Initial)

MR. DAVID J BATLUCK

Mailing Address 17 MULLIGAN DR

City

READING

State

PA

Zip Code

19606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

ST. JOSEPH MEDICAL CENTER

Occupation

PHYSICIAN

Receipt For: 2010

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.45888

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR CLIFF BENSON, JR

Mailing Address PO BOX 97365

12921 DURAN RD

City

RALEIGH

State

NC

Zip Code

27624

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

GREY BULL INC

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45926

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR CHRISTOPHER BEQUETTE

Mailing Address 2601 WINDWARD BLVD

City

CHAMPAIGN

State

IL

Zip Code

61821

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

AMERICAN COACHES WEALTH  
MANAGEMENT

Occupation

FINANCIAL ADVISOR

Receipt For: 2010

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46111

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0002355-0000037  
Transaction ID : **SA11AI.45888**

B. Form/Schedule : **SA11AI** 0108318-0000074  
Transaction ID : **SA11AI.45926**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46111**

0100517-0000259

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 152

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

DEBORAH D BERGER

Mailing Address 2529 VIA SANCHEZ

City

PALOS VERDES ESTAT

State

CA

Zip Code

90274

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	1	0

Transaction ID: SA11AI.46232

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR ANTHONY R BIANCHI

Mailing Address 601 HACKBERRY RIDGE DR

City

MCKINNEY

State

TX

Zip Code

75070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REMAX

Occupation

REALTOR

Receipt For: 2010

☐ Primary☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	1	0

Transaction ID: SA11AI.46159

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

DR GARY R BISHOP

Mailing Address 15144 LARRY ST

City

POWAY

State

CA

Zip Code

92064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RIVERSIDE COUNTY

Occupation

PHARMACIST

Receipt For: 2010

☐ Primary☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	1	0

Transaction ID: SA11AI.46246

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional) .....

85.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0107754-0000375  
Transaction ID : **SA11AI.46232**

B. Form/Schedule : **SA11AI** 0103533-0000302  
Transaction ID : **SA11AI.46159**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46246**

0009108-0000390

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 15 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MS ANGELYN BLANCHARD

Mailing Address 3025 HARTLEY DR

City

SANTA ROSA

State

CA

Zip Code

95405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

PRIVATE TEACHER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46288

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR RONALD A BOSS

Mailing Address 977 COACHWAY

City

ANNAPOLIS

State

MD

Zip Code

21401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.45897

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS VIRGINIA R BOUKNIGHT

Mailing Address 308 NEELY FERRY ROAD

City

SIMPSONVILLE

State

SC

Zip Code

29680

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.45942

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103906-0000434  
Transaction ID : **SA11AI.46288**

B. Form/Schedule : **SA11AI** 0029376-0000047  
Transaction ID : **SA11AI.45897**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45942**

0108306-0000090

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR TERRY O BRISTOL

Mailing Address 344 E FOOTHILLS PKWY  
RED ROOM 9-W

City State Zip Code  
FORT COLLINS CO 80525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
344E FOOTHILLS PARKWAY FC  
COLORADO

Occupation  
ASSET MGR

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46207

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR DEL C BROOKS

Mailing Address 12789 MUIRFIELD BLVD N

City State Zip Code  
JACKSONVILLE FL 32225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SMURFIT STORE CONT. CORP

Occupation  
GEN MGR

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.45960

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR WENDELL BROWN

Mailing Address 300 N FILLMORE ST

City State Zip Code  
ARLINGTON VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BE SERVICES

Occupation  
ACCOUNTANT

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
2100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45903

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0024811-0000348  
Transaction ID : **SA11AI.46207**

B. Form/Schedule : **SA11AI** 0012784-0000108  
Transaction ID : **SA11AI.45960**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45903**

0107255-0000053

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A.**

Full Name (Last, First, Middle Initial)  
**MR WENDELL BROWN**

Mailing Address **300 N FILLMORE ST**

City State Zip Code  
**ARLINGTON VA 22201**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BE SERVICES**

Occupation  
**ACCOUNTANT**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**2200.00**

Date of Receipt

**10 / 13 / 2010**

**Transaction ID: SA11AI.45904**

Amount of Each Receipt this Period

**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS LINDSAY BUCKNER**

Mailing Address **520 HENNESSY RD**

City State Zip Code  
**YAKIMA WA 98908**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TREE TOP- INC.**

Occupation  
**SR. VICE PRESIDENT**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt

**10 / 05 / 2010**

**Transaction ID: SA11AI.46340**

Amount of Each Receipt this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS G ELLENE BUSBY**

Mailing Address **170 E CONNECTICUT AVE**

City State Zip Code  
**SOUTHERN PNES NC 28387**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**10 / 05 / 2010**

**Transaction ID: SA11AI.45931**

Amount of Each Receipt this Period

**25.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**225.00**

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.45904**

0107255-0000054

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.46340**

0107370-0000482

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45931**

0003053-0000080

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

LT COL RAY F BUTTS

Mailing Address 709 RIVERBEND BLVD

City

LONGWOOD

State

FL

Zip Code

32779

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45964

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR EARLE CANTY

Mailing Address 5467 SAUNDERS AVE

City

LOOMIS

State

CA

Zip Code

95650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOVOSTENT CORPORATION

Occupation  
VICE PRESIDENT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.46292

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

JOHN CARR

Mailing Address 27 LAUREL HILL RD

City

BRIDGEWATER

State

CT

Zip Code

06752

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NA

Occupation  
NA

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.45861

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI** 0104151-0000112  
Transaction ID : **SA11AI.45964**

B. Form/Schedule : **SA11AI** 0103911-0000438  
Transaction ID : **SA11AI.46292**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45861**

0106600-0000011

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 152

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR GORDON CHAN

Mailing Address 1023 NE 98TH ST

City

SEATTLE

State

WA

Zip Code

98115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHWEST HOSP

Occupation

C. T. TECHNOLOGIST

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	1	0

Transaction ID: SA11AI.46324

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR CHARLES DAN H CHENOWETH

Mailing Address 5515 W RICHEY RD

City

HOUSTON

State

TX

Zip Code

77066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TWSCO- INC

Occupation

EXECUTIVE

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	1	0

Transaction ID: SA11AI.46181

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

MRS Z IDELE COLLINS

Mailing Address PO BOX 849

City

SHADY COVE

State

OR

Zip Code

97539

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOUSEWIFE

Occupation

HOUSEWIFE

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	1	0

Transaction ID: SA11AI.46316

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

2050.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0032286-0000467  
Transaction ID : **SA11AI.46324**

B. Form/Schedule : **SA11AI** 0108307-0000324  
Transaction ID : **SA11AI.46181**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46316**

0020678-0000459

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR EBEN L CONNER, III

Mailing Address 10937 BIG POOL RD

City

BIG POOL

State

MD

Zip Code

21711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE MASTER'S WOODSHOP

Occupation  
MANAGER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.45900

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN H CRAWFORD

Mailing Address 20128 CHATEAU DR

City

SARATOGA

State

CA

Zip Code

95070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTEL CORP

Occupation  
COMPUTER ARCHITECT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46287

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR LEONARD A DEO

Mailing Address 2 SYLDEO DR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FLOWERS & GIFTS- INC.

Occupation  
FLORIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.45867

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

A.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.45900**

0002558-0000049

B.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.46287**

0106739-0000432

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45867**

0001536-0000016



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS CHERI DILLON

Mailing Address 3816 MAPLEWOOD LN

City

PLACERVILLE

State

CA

Zip Code

95667

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED SMALL BUSINESS OW-  
NER

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.46295

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR JAMES S ENGLUND

Mailing Address 302 CINDI CT

City

LONGVIEW

State

TX

Zip Code

75605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1601.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.46170

Amount of Each Receipt this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)

MR MAYNARD M EYESTONE

Mailing Address 19334 KINGS GARDEN DR N APT R-112

City

SHORELINE

State

WA

Zip Code

98133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.46327

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

725.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0060273-0000440  
Transaction ID : **SA11AI.46295**

B. Form/Schedule : **SA11AI** 0014348-0000313  
Transaction ID : **SA11AI.46170**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46327**

0010162-0000470

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A.**

Full Name (Last, First, Middle Initial)  
**MR JOSEPH FOUNTAIN**

Mailing Address **7909 FARNHAM CT**

City State Zip Code  
**RALEIGH NC 27615**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SENSORS SAFETY PRODUCTS**

Occupation  
**GM - SMALL BUSINESS OWNER**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**800.00**

Date of Receipt

**10 / 08 / 2010**

**Transaction ID: SA11AI.45927**

Amount of Each Receipt this Period

**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR FRED B FRANK**

Mailing Address **501 VIA JUAREZ**

City State Zip Code  
**SAN CLEMENTE CA 92673**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**COMFORT MUSIC**

Occupation  
**RECORD PRODUCER**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**700.00**

Date of Receipt

**10 / 07 / 2010**

**Transaction ID: SA11AI.46263**

Amount of Each Receipt this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR FRANK D FREUDENTHAL**

Mailing Address **2909 LOVERS LN**

City State Zip Code  
**SAINT JOSEPH MO 64506**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALTEC INDUSTRIES INC**

Occupation  
**RETIRED- NOW DO SOME CONSULTING**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt

**10 / 11 / 2010**

**Transaction ID: SA11AI.46120**

Amount of Each Receipt this Period

**200.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**400.00**

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103242-0000076  
Transaction ID : **SA11AI.45927**

B. Form/Schedule : **SA11AI** 0102190-0000409  
Transaction ID : **SA11AI.46263**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46120**

0098609-0000269

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
MR JERRY GARLAND

Mailing Address 239 CALVIN GOODMAN RD

City State Zip Code  
WEST JEFFERSON NC 28694

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TT ELECTRONICS

Occupation  
QA MANAGER

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.45935

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
MR EARL GJELDE

Mailing Address 790 ROSE ACRES CT

City State Zip Code  
LOVELAND CO 80537

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SPGI

Occupation  
CEO

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.46208

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS PHYLLIS L GUNTER

Mailing Address 12939 JULINGTON RIDGE DR E

City State Zip Code  
JACKSONVILLE FL 32258

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFO REQUESTED- NOT RECD

Occupation  
INFO REQUESTED- NOT RECD

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
281.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.45961

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0104248-0000084  
Transaction ID : **SA11AI.45935**

B. Form/Schedule : **SA11AI** 0106982-0000349  
Transaction ID : **SA11AI.46208**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45961**

0107460-0000109

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS CARL W GUSTKE

Mailing Address 233 STATON RD

City

CABOT

State

AR

Zip Code

72023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FEDERAL EX - (WIFE) REBSA-  
MEN R. H.

Occupation

PILOT - WIFE DEBORAH-RN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46145

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MRS EILEEN P HAMEL

Mailing Address 645 WILLOW VALLEY SQ # J312

City

LANCASTER

State

PA

Zip Code

17602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.45882

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR DONALD E HARRISON

Mailing Address 5382 MEADOW BROOK RD

City

BIRMINGHAM

State

AL

Zip Code

35242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.45981

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0022519-0000289  
Transaction ID : **SA11AI.46145**

B. Form/Schedule : **SA11AI** 0002195-0000031  
Transaction ID : **SA11AI.45882**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45981**

0106489-0000130

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR JERYL D HART

Mailing Address 1203 MONTICELLO AVE

City

LUBBOCK

State

TX

Zip Code

79416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
X8ENVIRONMENTAL.COM

Occupation  
ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46197

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MRS SHARON M HAST

Mailing Address 203 EMMONS ST SE

City

CALEDONIA

State

MI

Zip Code

49316

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CALEDONIA SCHOOLS

Occupation  
BUS DRIVER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46059

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MS M SANDRA HEA

Mailing Address 5924 CHILDRESS AVE

City

SAINT LOUIS

State

MO

Zip Code

63109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
REALTOR

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46116

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

525.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0105213-0000339  
Transaction ID : **SA11AI.46197**

B. Form/Schedule : **SA11AI** 0104007-0000211  
Transaction ID : **SA11AI.46059**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46116**

0106366-0000266

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
MR JAMES W HEATH

Mailing Address PO BOX 578

City State Zip Code  
CASCADE ID 83611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CASCADE SCHOOL DISTRICT  
#422

Occupation  
EDUCATOR

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.46214

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)  
MR DALE HEDRICK

Mailing Address 2200 CENTRE PARK WEST DR STE 100

City State Zip Code  
WEST PALM BEACH FL 33409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HEDRICK BROTHERS

Occupation  
GENERAL CONTRACTOR

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45971

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
MR BRUCE T HENDERSON, MD

Mailing Address 3730 BURNING TREE DR

City State Zip Code  
BLOOMFIELD MI 48302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
ORTHO SURGEON

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.46050

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1525.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.46214**

0102348-0000355

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.45971**

0047814-0000119

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46050**

0005155-0000203

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR ROBERT A HERRICK

Mailing Address 526 LOCHNESS LN

City

CARY

State

NC

Zip Code

27511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HERRICK ENGINEERING

Occupation  
ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45921

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS ZELL M HICKS

Mailing Address 601 N SIERRA VIEW ST

City

RIDGECREST

State

CA

Zip Code

93555

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.46280

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR STEPHEN HINDS

Mailing Address 34832 HIDDEN MEADOW DR

City

EVERGREEN

State

CO

Zip Code

80439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
BUILDER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.46204

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.45921**

0002945-0000071

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.46280**

0033320-0000425

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46204**

0107142-0000346

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN A HOCEVAR

Mailing Address 25840 CHARDON RD

City

CLEVELAND

State

OH

Zip Code

44143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

INSURANCE AGENT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46018

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR MICHAEL A HODGE

Mailing Address 610 PORTLAND LN

City

GALT

State

CA

Zip Code

95632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ORGANIZATIONAL DEVELOPMENT  
SERVICES

Occupation

SELF-EMPLOYED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.46291

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MR DAVID HOWARD

Mailing Address 14853 SUMMIT TRAIL RD

City

CHINO HILLS

State

CA

Zip Code

91709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KEY INFORMATION SYSTEMS

Occupation

SOLUTION ARCHITECT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 0 / 2 0 1 0

Transaction ID: SA11AI.46236

Amount of Each Receipt this Period

450.00

**SUBTOTAL** of Receipts This Page (optional) .....

975.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46018**

0108338-0000169 - FORMS SENT TO REATTRIBUTE EXCESS CONTRIBUTION. WILL AMEND/REPORT ACCORDING TO RETURN RECEIPT.

B. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46291**

0010944-0000437

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46236**

0106680-0000379



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 152

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR CLAYTON L HOWIE

Mailing Address 1673 POPLAR LN

City

CAMANO ISLAND

State

WA

Zip Code

98282

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For:

2010

☐ Primary☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	1	/	2	0	1	0

Transaction ID: SA11AI.46330

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR ALDEN P JOHNSON

Mailing Address 5010 LA BARRANCA ST

City

SAN ANTONIO

State

TX

Zip Code

78233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

MORTGAGE LOAN OFFICER

Receipt For:

2010

☐ Primary☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	1	0

Transaction ID: SA11AI.46191

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MR WILLIAM JONES

Mailing Address 152 BUCKNER ST

City

JACKSBORO

State

TX

Zip Code

76458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

WELDER

Receipt For:

2010

☐ Primary☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.46174

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

75.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0100387-0000472  
Transaction ID : **SA11AI.46330**

B. Form/Schedule : **SA11AI** 0104518-0000335  
Transaction ID : **SA11AI.46191**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46174**

0107126-0000318

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR FLOYD R JUMP

Mailing Address 350 E HENSCHEN ST

City

GARNER

State

IA

Zip Code

50431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46067

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

DR JOHN D KEISLING

Mailing Address 35 ERICA LN

City

BELEN

State

NM

Zip Code

87002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAIC

Occupation  
SCIENTIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.46228

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

KRISTI KEPLEY

Mailing Address 111 BENSON BLVD

City

MADISON

State

AL

Zip Code

35758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOME

Occupation  
RN/HOMEHAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.45984

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

1125.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103497-0000218  
Transaction ID : **SA11AI.46067**

B. Form/Schedule : **SA11AI** 0100128-0000370  
Transaction ID : **SA11AI.46228**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45984**

0107048-0000133

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN D KINZER

Mailing Address 11413 NASSAU DR NE

City

ALBUQUERQUE

State

NM

Zip Code

87111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
TUTOR

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.46229

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOSEPH L KRAUSE, JR

Mailing Address PO BOX 189

City

WILLCOX

State

AZ

Zip Code

85644

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.46226

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT LAKE

Mailing Address 2721 18TH ST

City

BAKERSFIELD

State

CA

Zip Code

93301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WESTERN OILFIELDS SUPPLY  
CO

Occupation  
CFO

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.46275

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0033910-0000372  
Transaction ID : **SA11AI.46229**

B. Form/Schedule : **SA11AI** 0103893-0000368  
Transaction ID : **SA11AI.46226**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46275**

0009387-0000419

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS JOAN K LAUTENSCHLEGE

Mailing Address 24621 CHARLTON DR

City

LAGUNA HILLS

State

CA

Zip Code

92653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.46259

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

RICHARD D LEBLEU

Mailing Address 7458 EASTLAKE RD

City

STERLINGTON

State

LA

Zip Code

71280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DIXIE PULP & PAPER- INC.

Occupation  
SALESMAN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46143

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MR WILLIAM P LEONARD

Mailing Address 6100 LAKE FORREST DR NW

City

ATLANTA

State

GA

Zip Code

30328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WM. LEONARD & CO.

Occupation  
REAL ESTATE

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45949

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

425.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0107445-0000403  
Transaction ID : **SA11AI.46259**

B. Form/Schedule : **SA11AI** 0106147-0000287  
Transaction ID : **SA11AI.46143**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45949**

0105706-0000098

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR LARRY LEWIS

Mailing Address 4717 HERITAGE DR

City

LYNCHBURG

State

VA

Zip Code

24503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45915

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR MARK LONGNECKER

Mailing Address 2991 WESTSIDE DR

City

CHATTANOOGA

State

TN

Zip Code

37404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUTHERN CHAMPION TRAY

Occupation  
CFO

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45997

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

DONNA LUNDHOLM

Mailing Address 858 MONA LN

City

SPRING LAKE

State

MI

Zip Code

49456

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NA

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.46064

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

325.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0105274-0000067  
Transaction ID : **SA11AI.45915**

B. Form/Schedule : **SA11AI** 0098594-0000148  
Transaction ID : **SA11AI.45997**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46064**

0108356-0000215

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A.**

Full Name (Last, First, Middle Initial)

MR HUGH O MACLELLAN, JR

Mailing Address 200 W FLEETWOOD DR

City

LOOKOUT MTN

State

TN

Zip Code

37350

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 RETIRED

Occupation  
 RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45995

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

JOCELYN MANULLANG

Mailing Address 8303 121ST AVE SE

City

NEWCASTLE

State

WA

Zip Code

98056

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.46321

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR JAMES MATHEW

Mailing Address 10576 W DASON DR

City

BOISE

State

ID

Zip Code

83704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 MICRON TECHNOLOGY

Occupation  
 ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.46217

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.45995**

0031736-0000144

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.46321**

0107670-0000464

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46217**

0101158-0000358

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR ROBERT MCCLELLAN

Mailing Address 15 WILDHAWK

City

IRVINE

State

CA

Zip Code

92603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

ATTORNEY

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46256

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MAE L MCKINLEY

Mailing Address 515 11TH AVE NE

City

MINOT

State

ND

Zip Code

58703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46097

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR MIKE MCRAE

Mailing Address P O BOX 1432

City

FAIR OAKS

State

CA

Zip Code

95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.46290

Amount of Each Receipt this Period

3500.00

**SUBTOTAL** of Receipts This Page (optional) .....

3650.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0106374-0000399  
Transaction ID : **SA11AI.46256**

B. Form/Schedule : **SA11AI** 0101794-0000246  
Transaction ID : **SA11AI.46097**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46290**

0108305-0000435

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS JOAN H MIDDLETON

Mailing Address 13970 HOLLY FOREST DR

City

MANASSAS

State

VA

Zip Code

20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.45890

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

DEBBIE MILLER

Mailing Address 3437 COUNTY ROAD 959

City

LOUDONVILLE

State

OH

Zip Code

44842

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
PHYSICIAN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.46021

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT MILNE

Mailing Address 2144 COUNTY ROAD 215

City

BRECKENRIDGE

State

TX

Zip Code

76424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46173

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

425.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0107004-0000039  
Transaction ID : **SA11AI.45890**

B. Form/Schedule : **SA11AI** 0096741-0000173  
Transaction ID : **SA11AI.46021**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46173**

0107983-0000317



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS ELAINE E MINAMIDE

Mailing Address 2134 EUCALYPTUS AVE

City

ESCONDIDO

State

CA

Zip Code

92029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PALOMAR COLLEGE

Occupation  
TEACHER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46243

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MS JUDY A MOLITOR

Mailing Address PO BOX 444

City

CEDAR KEY

State

FL

Zip Code

32625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.45963

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MS SANDRA M MONEY

Mailing Address 6 TROY PL

City

NISKAYUNA

State

NY

Zip Code

12309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPITAL REGION BOCES

Occupation  
SPEECH/LANGUAGE PATHOLOGIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45873

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0014047-0000386  
Transaction ID : **SA11AI.46243**

B. Form/Schedule : **SA11AI** 0103501-0000111  
Transaction ID : **SA11AI.45963**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45873**

0103321-0000022

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

DR DAVID MORRISON

Mailing Address 1802 CROOM DR

City

MONTGOMERY

State

AL

Zip Code

36106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

PHYSICIAN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.45986

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

DR DAVID MORRISON

Mailing Address 1802 CROOM DR

City

MONTGOMERY

State

AL

Zip Code

36106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

PHYSICIAN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.45987

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

DR & MRS STEVEN MULL

Mailing Address 10661 WHISPERING PINES WAY

City

ROCKFORD

State

IL

Zip Code

61114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OSF MEDICAL GROUP

Occupation

PHYSICIAN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.46108

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.45986**

0003940-0000135

B. Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.45987**

0003940-0000136

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46108**

0031886-0000256

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 87 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS ARTHA M NEUENFELDT

Mailing Address 637 ROBINSON RD

City

JACKSON

State

MI

Zip Code

49203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46058

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City

LA JOLLA

State

CA

Zip Code

92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46244

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR JOHN NICHOLS, JR

Mailing Address 1654 LA JOLLA RANCHO RD

City

LA JOLLA

State

CA

Zip Code

92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.46245

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

210.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103940-0000210  
Transaction ID : **SA11AI.46058**

B. Form/Schedule : **SA11AI** 0105158-0000387  
Transaction ID : **SA11AI.46244**



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46245**

0105158-0000388

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS ELIZABETH J NOBLE

Mailing Address 4015 OAK HARBOUR CIR

City

GAINESVILLE

State

GA

Zip Code

30506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CROWN FINANCIAL MINISTRIES

Occupation

R & D SPECIALIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45950

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID NOEBEL

Mailing Address 111 MOHAWK ST

City

MANITOU SPRINGS

State

CO

Zip Code

80829

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUMMIT MINISTRIES

Occupation

PRESIDENT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46211

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR MARION PARKER

Mailing Address PO BOX 292

City

HOMERVILLE

State

GA

Zip Code

31634

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEE CONTAINER

Occupation

RECEPTIONIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45957

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

145.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0083557-0000099  
Transaction ID : **SA11AI.45950**

B. Form/Schedule : **SA11AI** 0105784-0000352  
Transaction ID : **SA11AI.46211**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45957**

0106926-0000104

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

JEAN PARRISH

Mailing Address 12027 SYCAMORE LAKES CT

City

FORT WAYNE

State

IN

Zip Code

46814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46043

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR MARK PENLEY

Mailing Address 4328 HOCKADAY DR

City

DALLAS

State

TX

Zip Code

75229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.46167

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR GORDON PETERSON

Mailing Address 3856 CALLE DEL ESTABLO

City

SAN CLEMENTE

State

CA

Zip Code

92672

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation

RETIRED LAWYER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.46261

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0108321-0000195  
Transaction ID : **SA11AI.46043**

B. Form/Schedule : **SA11AI** 0105740-0000311  
Transaction ID : **SA11AI.46167**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46261**

0009209-0000406

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR GORDON PETERSON

Mailing Address 3856 CALLE DEL ESTABLO

City

SAN CLEMENTE

State

CA

Zip Code

92672

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation

RETIRED LAWYER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.46262

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS ELIZABETH S POWELL

Mailing Address 10050 WHITE SHOP RD

City

CULPEPER

State

VA

Zip Code

22701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED DENTIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.45907

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

LESLIE RUSH

Mailing Address 11701 NW 37TH PL

City

SUNRISE

State

FL

Zip Code

33323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US DEPT. OF STATE

Occupation

CONTRACTING OFFICER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45970

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

2150.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI** 0009209-0000407  
Transaction ID : **SA11AI.46262**

B. Form/Schedule : **SA11AI** 0086597-0000058  
Transaction ID : **SA11AI.45907**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45970**

0102926-0000118

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MS SHAREN RUSSELL

Mailing Address 1651 WILSON AVE

City

CHESTERFIELD

State

MO

Zip Code

63005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.46115

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR RAYMOND L SALZMAN

Mailing Address 11151 RAWHIDE RD

City

LUSBY

State

MD

Zip Code

20657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.45892

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR RAYMOND L SALZMAN

Mailing Address 11151 RAWHIDE RD

City

LUSBY

State

MD

Zip Code

20657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.45893

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0102751-0000264  
Transaction ID : **SA11AI.46115**

B. Form/Schedule : **SA11AI** 0097659-0000041  
Transaction ID : **SA11AI.45892**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45893**

0097659-0000042

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR THOMAS M SEAVER

Mailing Address 2886 EASTWOOD DR

City

KIMBALL

State

MI

Zip Code

48074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THOMAS M SEAVER TRUST

Occupation

RETIRED TEACHER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	1	/	2	0	1	0

Transaction ID: SA11AI.46045

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR GARY J SELF

Mailing Address 8508 YORKSHIRE DR

City

ORANGE

State

TX

Zip Code

77632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HEB

Occupation

PHARMACIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	1	0

Transaction ID: SA11AI.46187

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

MR PAUL V SERENIUS

Mailing Address 321 VILLAGE SQUARE DR

City

CENTERVILLE

State

OH

Zip Code

45458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.46028

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

620.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0012537-0000198  
Transaction ID : **SA11AI.46045**

B. Form/Schedule : **SA11AI** 0013298-0000331  
Transaction ID : **SA11AI.46187**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46028**

0104852-0000181



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR PAUL V SERENIUS

Mailing Address 321 VILLAGE SQUARE DR

City

CENTERVILLE

State

OH

Zip Code

45458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.46029

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MRS BEVERLY ANN SHARPF

Mailing Address 10819 SW CANTERBURY LN STE 101

City

PORTLAND

State

OR

Zip Code

97224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.46311

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

JAN SHEDD

Mailing Address 1026 BEND WEST DR

City

KAUFMAN

State

TX

Zip Code

75142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CITY OF OAK RIDGE

Occupation  
CITY SECRETARY

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46163

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0104852-0000182  
Transaction ID : **SA11AI.46029**

B. Form/Schedule : **SA11AI** 0001231-0000454  
Transaction ID : **SA11AI.46311**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46163**

0103119-0000306

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR WARREN SIMANDLE

Mailing Address 2322 VISTA MADERA

City

SANTA BARBARA

State

CA

Zip Code

93101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SANTA BARBARA HIGH SCHOOL  
DIST

Occupation

PUBLIC SCHOOL TEACHER

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46274

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

DIANA SISK

Mailing Address 1509 LAKEWOOD DR

City

LEXINGTON

State

KY

Zip Code

40502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PARACLETE CHRISTIAN COUNS-  
ELING

Occupation

COUNSELOR

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.46011

Amount of Each Receipt this Period

1250.00

**C.**

Full Name (Last, First, Middle Initial)

MR RANDALL SKOV

Mailing Address 115 TALL TIMBER CT

City

FAYETTEVILLE

State

GA

Zip Code

30215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US AIR FORCE

Occupation

WEATHER OFFICER

Receipt For:

2010

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.45948

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1325.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0009367-0000418  
Transaction ID : **SA11AI.46274**

B. Form/Schedule : **SA11AI** 0108359-0000161  
Transaction ID : **SA11AI.46011**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45948**

0014942-0000097

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR WILLIAM L SLOSS

Mailing Address 264 WEST LN

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BFP- INC.

Occupation  
SALES

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.46102

Amount of Each Receipt this Period

45.00

**B.**

Full Name (Last, First, Middle Initial)

MRS DEBORAH E SMITH

Mailing Address 3360 E TERRELL BRANCH CT SE

City

MARIETTA

State

GA

Zip Code

30067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.45945

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MRS LINDA C SMITH

Mailing Address 17618 REXWOOD ST

City

LIVONIA

State

MI

Zip Code

48152

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ARBOR HOSPICE

Occupation  
RN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46048

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

95.00

**TOTAL** This Period (last page this line number only) .....

A.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.46102**

0034033-0000250

B.

Form/Schedule : **SA11AI**

Transaction ID : **SA11AI.45945**

0027760-0000094



C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46048**

0038656-0000201

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

DR WILLIAM H SMITH

Mailing Address PO BOX 203

City

KAAAWA

State

HI

Zip Code

96730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STATE OF HAWAII

Occupation  
TEACHER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.46306

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

LAKE C SPEED

Mailing Address 4025 OLD SALISBURY CONCORD RD

City

KANNAPOLIS

State

NC

Zip Code

28083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
WAREHOUSING

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45928

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MRS ARLANA ST CLAIR

Mailing Address 3401 WIBLE RD

City

BAKERSFIELD

State

CA

Zip Code

93309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFO REQUESTED- NOT RECD

Occupation  
INFO REQUESTED- NOT RECD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.46276

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103927-0000449  
Transaction ID : **SA11AI.46306**

B. Form/Schedule : **SA11AI** 0027438-0000077  
Transaction ID : **SA11AI.45928**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46276**

0015853-0000420

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 152

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS TAMMY E STEINBERG

Mailing Address 101 WINDINGHAM DR NW

City

HUNTSVILLE

State

AL

Zip Code

35806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HARRO APOTHERAPY

Occupation

HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	1	0

Transaction ID: SA11AI.45985

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

MR STEPHEN STUDE

Mailing Address 32797 820TH ST

City

BREWSTER

State

MN

Zip Code

56119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation

FARMER

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	1	0

Transaction ID: SA11AI.46091

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MALCOLM SULLIVAN

Mailing Address 1550 CUYLER BEST RD

City

GOLDSBORO

State

NC

Zip Code

27534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PATE DAWSON COMPANY

Occupation

PRESIDENT

Receipt For: 2010

☐ Primary ☒ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	1	0

Transaction ID: SA11AI.45924

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

145.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0011951-0000134  
Transaction ID : **SA11AI.45985**

B. Form/Schedule : **SA11AI** 0006116-0000240  
Transaction ID : **SA11AI.46091**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.45924**

0105269-0000073

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR RICHARD SUNGAILA

Mailing Address 1827 PORT STANHOPE PL

City

NEWPORT BEACH

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation

REAL ESTATE & PROP MGMNT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.46260

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR ROBERT D SWEET, JR

Mailing Address 182 PIONEER FARM WAY

City

ELLSWORTH

State

ME

Zip Code

04605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.45858

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR MARK SWISHER

Mailing Address 24902 N POINT PL

City

KATY

State

TX

Zip Code

77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AVIARA ENERGY CORPORATION

Occupation

ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.46186

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

575.00

**TOTAL** This Period (last page this line number only) .....



A. Form/Schedule : **SA11AI** 0106678-0000405  
Transaction ID : **SA11AI.46260**

B. Form/Schedule : **SA11AI** 0016123-0000008  
Transaction ID : **SA11AI.45858**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46186**

0048257-0000330

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 123 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS CAROL D TEODORO**

Mailing Address **3008 E BAY DR NW**

City State Zip Code  
**GIG HARBOR WA 98335**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ADVANCED WOMEN'S HEALTH**

Occupation  
**MEDICAL ASSISTANT**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**10 / 13 / 2010**

**Transaction ID: SA11AI.46333**

Amount of Each Receipt this Period

**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR BRIAN P THIELEN**

Mailing Address **416 S DIVISION ST**

City State Zip Code  
**CHENOA IL 61726**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THIELEN- FOLEY & MIRDO LLC**

Occupation  
**LAWYER**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**275.00**

Date of Receipt

**10 / 07 / 2010**

**Transaction ID: SA11AI.46109**

Amount of Each Receipt this Period

**25.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR BRIAN P THIELEN**

Mailing Address **416 S DIVISION ST**

City State Zip Code  
**CHENOA IL 61726**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**THIELEN- FOLEY & MIRDO LLC**

Occupation  
**LAWYER**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**375.00**

Date of Receipt

**10 / 13 / 2010**

**Transaction ID: SA11AI.46110**

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**225.00**

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0103402-0000475  
Transaction ID : **SA11AI.46333**

B. Form/Schedule : **SA11AI** 0101059-0000257  
Transaction ID : **SA11AI.46109**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46110**

0101059-0000258

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS ROBERT D THRASHER

Mailing Address 4301 PIONEER ST

City

IRVINE

State

CA

Zip Code

92604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSI ENGINEERING

Occupation  
ENGINEER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11AI.46257

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN W TIMMONS

Mailing Address 1444 BETHEL CHURCH RD

City

ELKTON

State

VA

Zip Code

22827

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAGE MEMORIAL HOSPITAL

Occupation  
PHYSICIAN

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 0 / 2 0 1 0

Transaction ID: SA11AI.45908

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR PAUL A TONDRE

Mailing Address 410 RUA DE MATTA ST

City

SAN ANTONIO

State

TX

Zip Code

78232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.46190

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional) .....

745.00

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0013798-0000400  
Transaction ID : **SA11AI.46257**

B. Form/Schedule : **SA11AI** 0002694-0000060  
Transaction ID : **SA11AI.45908**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46190**

0046592-0000334



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 152

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN UKICH

Mailing Address 11493 N EASTSHORE DR

City

HAYDEN LAKE

State

ID

Zip Code

83835

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
DENTIST

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	1	0

Transaction ID: SA11AI.46221

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MR LEON WALTHALL

Mailing Address PO BOX 17991

City

SAN ANTONIO

State

TX

Zip Code

78217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MORTIMER FAMILY INVESTMEN-  
TSOccupation  
VICE PRESIDENT

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	1	0

Transaction ID: SA11AI.46189

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MRS DONALD A WHITE, JR

Mailing Address 9412 ROCKY HILLS DR

City

CORDOVA

State

TN

Zip Code

38018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	1	0

Transaction ID: SA11AI.46001

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

225.00

TOTAL This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0106815-0000363  
Transaction ID : **SA11AI.46221**

B. Form/Schedule : **SA11AI** 0075254-0000333  
Transaction ID : **SA11AI.46189**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46001**

0101707-0000153

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**CAMPAIGN FOR WORKING FAMILIES**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS LOIS WIERENGA**

Mailing Address **3442 OLDERIDGE DR NE**

City State Zip Code  
**GRAND RAPIDS MI 49525**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GRAND RAPIDS PUBLIC SCHOOLS**

Occupation  
**TEACHER**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**10 / 05 / 2010**

Transaction ID: SA11AI.46065

Amount of Each Receipt this Period

**25.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR GERALD WOOD**

Mailing Address **2382 COUNTY ROAD 1150 N**

City State Zip Code  
**HOMER IL 61849**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**RETIRED**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000.00**

Date of Receipt

**10 / 11 / 2010**

Transaction ID: SA11AI.46113

Amount of Each Receipt this Period

**2000.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS MARILYN WOY**

Mailing Address **27511 HYATT CT**

City State Zip Code  
**LAGUNA NIGUEL CA 92677**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MARINERS CHURCH**

Occupation  
**ADMINISTRATIVE ASSISTANT**

Receipt For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**425.00**

Date of Receipt

**10 / 07 / 2010**

Transaction ID: SA11AI.46264

Amount of Each Receipt this Period

**25.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**2050.00**

**TOTAL** This Period (last page this line number only) .....

A. Form/Schedule : **SA11AI** 0005517-0000216  
Transaction ID : **SA11AI.46065**

B. Form/Schedule : **SA11AI** 0103168-0000261  
Transaction ID : **SA11AI.46113**

C. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.46264**

0106759-0000410

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

MRS JANE WRIGHT

Mailing Address 2125 MORRIS AVE

City

BIRMINGHAM

State

AL

Zip Code

35203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAJJAR DENABURG PC

Occupation

PARALEGAL

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.45979

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MR CHARLES M ZEISER

Mailing Address 510 ROLLING WAY

City

SIGNAL MOUNTAIN

State

TN

Zip Code

37377

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUTHERN CHAMPION TRAY LP

Occupation

CHAIRMAN OF THE BOARD

Receipt For: 2010

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: SA11AI.45996

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2050.00

**TOTAL** This Period (last page this line number only) .....

31575.00

A. Form/Schedule : **SA11AI** 0105176-0000128  
Transaction ID : **SA11AI.45979**

B. Form/Schedule : **SA11AI** 0097422-0000146  
Transaction ID : **SA11AI.45996**



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
ADVANCED DIGITAL SOLUTIONS

Mailing Address 10680 MAIN STREET

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.46351

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address P.O. Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement  
BANK FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.46348

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)  
American Express

Mailing Address P.O. Box 981540

City El Paso State TX Zip Code 79998

Purpose of Disbursement  
BANK FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.46349

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 138 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
Authorize.net

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement  
BANK FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.46347

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

55.75

**B.**

Full Name (Last, First, Middle Initial)  
BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City PITTSBURGH State PA Zip Code 15211

Purpose of Disbursement  
AD PRODUCTION COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.44777

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

3700.00

**C.**

Full Name (Last, First, Middle Initial)  
BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City PITTSBURGH State PA Zip Code 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.46360

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

3700.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7455.75

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City  
PITTBURGHState  
PAZip Code  
15211Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46362

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	0

Amount of Each Disbursement this Period

3700.00

**B.**

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City  
PITTBURGHState  
PAZip Code  
15211Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46364

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	0

Amount of Each Disbursement this Period

3700.00

**C.**

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City  
PITTBURGHState  
PAZip Code  
15211Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46366

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	0

Amount of Each Disbursement this Period

3700.00

SUBTOTAL of Disbursements This Page (optional) .....

11100.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City State Zip Code  
PITTBURGH PA 15211Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46368

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	0

Amount of Each Disbursement this Period

3700.00

**B.**

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City State Zip Code  
PITTBURGH PA 15211Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46370

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	0

Amount of Each Disbursement this Period

3700.00

**C.**

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City State Zip Code  
PITTBURGH PA 15211Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46372

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	0

Amount of Each Disbursement this Period

3700.00

SUBTOTAL of Disbursements This Page (optional) .....

11100.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 141 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City State Zip Code  
PITTBURGH PA 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.46374

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

3700.00

B.

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City State Zip Code  
PITTBURGH PA 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.46359

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

125098.00

C.

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City State Zip Code  
PITTBURGH PA 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.46361

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

67596.00

SUBTOTAL of Disbursements This Page (optional) .....

196394.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 142 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)  
BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City PITTBURGH State PA Zip Code 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.46363

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

70065.00

B.

Full Name (Last, First, Middle Initial)  
BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City PITTBURGH State PA Zip Code 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.46365

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

59051.00

C.

Full Name (Last, First, Middle Initial)  
BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City PITTBURGH State PA Zip Code 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.46367

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

110076.00

SUBTOTAL of Disbursements This Page (optional) .....

239192.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 143 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES

**A.**

Full Name (Last, First, Middle Initial)  
BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City PITTBURGH State PA Zip Code 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.46369

Date of Disbursement

/   /

Amount of Each Disbursement this Period

72720.00

**B.**

Full Name (Last, First, Middle Initial)  
BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City PITTBURGH State PA Zip Code 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.46371

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50292.00

**C.**

Full Name (Last, First, Middle Initial)  
BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City PITTBURGH State PA Zip Code 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.46373

Date of Disbursement

/   /

Amount of Each Disbursement this Period

112281.00

**SUBTOTAL** of Disbursements This Page (optional) .....

235293.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 144 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City State Zip Code  
PITTBURGH PA 15211

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.46375

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

123549.00

B.

Full Name (Last, First, Middle Initial)

BRABENDER COX

Mailing Address 1218 GRANDVIEW AVE

City State Zip Code  
PITTBURGH PA 15211

Purpose of Disbursement  
AD PRODUCTION COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.44778

Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

-3700.00

C.

Full Name (Last, First, Middle Initial)

COVAD COMMUNICATIONS

Mailing Address P.O. BOX 39000

City State Zip Code  
SAN FRANCISCO CA 94139

Purpose of Disbursement  
COMPUTER SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.46352

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

104.45

SUBTOTAL of Disbursements This Page (optional) .....

119953.45

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 145 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

COVINGTON & BURLING

Mailing Address 1201 PENNSYLVANIA AVE NW

City  
WASHINGTON

State  
DC

Zip Code  
20044

Purpose of Disbursement  
LEGAL FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46353

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

375.00

B.

Full Name (Last, First, Middle Initial)

DEER PARK

Mailing Address P.O. BOX 52271

City  
PHOENIX

State  
AZ

Zip Code  
85072

Purpose of Disbursement  
OFFICE EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46354

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

26.22

C.

Full Name (Last, First, Middle Initial)

FEDERAL EXPRESS

Mailing Address P.O. BOX 1140

City  
MEMPHIS

State  
TN

Zip Code  
38101

Purpose of Disbursement  
SHIPPING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46355

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

31.46

SUBTOTAL of Disbursements This Page (optional) .....

432.68

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 146 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

LPS

Mailing Address P.O. BOX 2325

City  
FAIRFAX

State  
VA

Zip Code  
22031

Purpose of Disbursement  
PAC DATA PROCESSING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46358

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

1112.23

B.

Full Name (Last, First, Middle Initial)

U.S. POSTMASTER

Mailing Address MAIN POST OFFICE

City  
WASHINGTON

State  
DC

Zip Code  
20000

Purpose of Disbursement  
GENERAL OFFICE POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46350

Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

DEAN VIRAG

Mailing Address 14039 WESTWIND LANE

City  
CULPEPER

State  
VA

Zip Code  
22701

Purpose of Disbursement  
WEBSITE SUPPORT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.46357

Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1912.23

TOTAL This Period (last page this line number only) .....

824547.90

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 147 / 152

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

A.

Full Name (Last, First, Middle Initial)

BRODEN FOR CONGRESS

Mailing Address PO BOX 1327

City  
DESOTO

State  
TX

Zip Code  
75123

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
BRODEN FOR CONGRESS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 30

Transaction ID: SB23.46376

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

3000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 148 / 152

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
DIRECTECHNature of Debt (Purpose):  
CAGING AND DATA PROCESSING

Mailing Address 8595 GROVEMONT CIRCLE

City State ZIP Code  
GAITHERSBURG MD 20877

Outstanding Balance Beginning This Period

223.11

Transaction ID: SD10.4694

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

223.11

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LPSNature of Debt (Purpose):  
PAC DATA PROCESSING SERVI-  
CES

Mailing Address P.O. BOX 2325

City State ZIP Code  
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

1408.51

Transaction ID: SD10.45847

Amount Incurred This Period

0.00

Payment This Period

1112.23

Outstanding Balance at Close of This Period

296.28

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MWM DIRECT MARKETING SERVICESNature of Debt (Purpose):  
PAC - DIRECT MAIL

Mailing Address 8048 HILLRISE COURT

City State ZIP Code  
ELKRIDGE MD 21075

Outstanding Balance Beginning This Period

2320.90

Transaction ID: SD10.4696

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2320.90

1) **SUBTOTALS** This Period This Page (optional).....

2840.29

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 149 / 152

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
CAMPAIGN FOR WORKING FAMILIES**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WASHINGTON INTELLIGENCE BUREAUNature of Debt (Purpose):  
PAC CAGING AND DATA ENTRY  
SERVICES

Mailing Address 4128 PEPSI PLACE

City State ZIP Code  
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

1181.07

Transaction ID: SD10.45845

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1181.07

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1181.07

2) **TOTALS** This Period (last page this line number only)..... ▶

4021.36

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

4021.36

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 150 / 152

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CAMPAIGN FOR WORKING FAMILIES		<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00325076	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee BRABENDER COX		Date MM / DD / YYYY 10 / 04 / 2010	
Mailing Address 1218 GRANDVIEW AVE		Amount 3700.00	
City State Zip Code PITTBURGH PA 15211		<b>Transaction ID:</b> SE.44686	
Purpose of Expenditure BROADCAST PRODUCTION		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: STEVE CHABOT		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee BRABENDER COX		Date MM / DD / YYYY 10 / 04 / 2010	
Mailing Address 1218 GRANDVIEW AVE		Amount 3700.00	
City State Zip Code PITTBURGH PA 15211		<b>Transaction ID:</b> SE.44689	
Purpose of Expenditure AD PRODUCTION		Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: HARRY REID		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....		7400.00	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....			
(c) <b>TOTAL</b> Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Dorie Velezis Signature		Date MM / DD / YYYY 10 / 21 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 151 / 152

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CAMPAIGN FOR WORKING FAMILIES		FEC IDENTIFICATION NUMBER <b>C</b> C00325076	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee BRABENDER COX		Date MM / DD / YYYY 10 / 04 / 2010	
Mailing Address 1218 GRANDVIEW AVE		Amount -3700.00	
City State Zip Code PITTBURGH PA 15211		Transaction ID: SE.44774	
Purpose of Expenditure AD PRODUCTION COSTS		Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: HARRY REID		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 0.00		2010	
Full Name (Last, First, Middle, Initial) of Payee BRABENDER COX		Date MM / DD / YYYY 10 / 08 / 2010	
Mailing Address 1218 GRANDVIEW AVE		Amount 3700.00	
City State Zip Code PITTBURGH PA 15211		Transaction ID: SE.44779	
Purpose of Expenditure AD PRODUCTION COSTS		Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: HARRY REID		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 3700.00		2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Dorie Velezis Signature		Date MM / DD / YYYY 10 / 21 / 2010	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 152 / 152

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CAMPAIGN FOR WORKING FAMILIES		<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00325076
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee NEW PARADIGM MEDIA		Date M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 1 0
Mailing Address 9668 SILVERBERRY CIRCLE		Amount 121250.00
City HIGHLANDS RANCH	State CO	Zip Code 80129
Purpose of Expenditure Independent Expenditure		Category/ Type 004
Name of Federal Candidate supported or Opposed by expenditure: STEVE CHABOT		<b>Transaction ID:</b> SE.44680
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	121250.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	128650.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Dorie Velezis Signature	Date M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0